

# L T C A L E R T

## *What You Should Know About Long-Term Care*

*California Partnership for Long-Term Care*

*December 2002*

## HAPPY HOLIDAYS AND SEASONS GREETINGS FROM THE PARTNERSHIP

With the holidays quickly approaching and families set to gather, conversations around the dinner table may be about how our loved ones wish to be cared for (or how they will be cared for, given family dynamics). When care is needed, it's usually at a time of crisis. Does anyone really know how to get services in place to meet someone's LTC needs? The focus of this holiday's LTC Alert is the Partnership's Care Management feature and its benefit to Partnership policyholders. We are providing you with some Questions and Answers that we hope are beneficial in explaining this important feature to your clients.



### ***Why are Care Management benefits required to be part of a California Partnership policy's home care benefit?***

Partnership policies are designed to include the highest level of consumer protections and benefits. Care Management can help a policyholder remain in their home and be as independent as possible. When needed, Care Managers can locate Residential Care Facilities for the Elderly or Nursing Homes that will best fit the clients needs. The Care manager can coordinate and monitor the services provided, which



can also benefit the policyholder financially since, in some situations, they can help arrange for discounts on the services received that helps to maximize their policy benefits and limits out of pocket expenses.

### ***Who provides the Care Management services included in a California Partnership policy?***

The California Partnership requires that only approved Care Management Provider Agencies (CMPA's) provide the Care Management services included in a Partnership policy. Each participating insurance company contracts with one or more of the approved CMPA's to provide Care Management services to Partnership policyholders. These CMPA's in turn, contract with licensed nurses and social workers located throughout California



The CMPA must meet certain regulatory requirements, such as assuring that their Care Managers have met the minimum licensing and education requirements. These criteria require Care Managers to have expertise in developing Plans of Care, which provide a comprehensive measure of a clients needs and the services necessary to meet those needs. Care Managers employed by the CMPA are also familiar with various home and community care options.

***What services are provided with the Care Management benefit under a California Partnership policy?***

A Care Manager, who contracts with the approved CMPA and lives in the area of the client's residence, completes the initial assessment, which includes a face-to-face visit with the client, their family, and any other responsible parties. If after reviewing the assessment, the insurance company determines the policyholder is eligible for benefits, the Care Manager develops a comprehensive Plan of Care. The Plan of Care identifies all the services and supports they will need. The client has the final say on which of the services included on the Plan of Care they will use. Care Managers also perform reassessments every six months to see if the needs of the client have changed. If the client

desires and the Care Manager deems it necessary, the Care Manager can also help coordinate the services the client needs and monitor the services provided.

***Will a Care Manager request input from a policyholder's doctor?***

Absolutely! If the policyholder gives their permission, the Care Manager will work with any health care professional involved in the policyholder's care to develop a Plan of Care that will best meet their needs.

In developing the Plan of Care, the Care Manager must obtain a comprehensive picture of what the clients' needs are, and therefore, will communicate with their doctor, other health care professionals, family members and any others who are involved in their care.

FYI - In an effort to reduce costs, the Partnership will no longer be mailing copies of our LTC Alerts. If you have an e-mail address, please e-mail your name and license number to [cpltcas@dhs.ca.gov](mailto:cpltcas@dhs.ca.gov). When ready for distribution, they will be sent to your e-mail. For those who do not have an e-mail address, you will be able to access the LTC Alerts through the website.

**\*Important Notice\***

**The minimum daily  
Nursing Facility  
care benefit for 2003  
is \$110.**

LTC Alerts are produced by the California Partnership for Long-Term Care as a service to agents and their clients.

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